

What's your Make and Model?

Taking Care of your "Vehicle"

Lesson Overview

This lesson focuses on how body image is developed and what factors contribute to a positive versus negative body image. Students will consider how the "ideal" body image has changed historically and how it varies with age, gender, and culture. The impact of the media and advertising on body image is discussed with an emphasis on how to counteract the negative impact. This lesson also includes a discussion of the difference between normal and dysfunctional eating behaviors and an activity to review eating disorders (including some information about less well-known disorders), and resources for students and teachers to access help and more information. Students will appreciate the importance of a healthy body image and a healthy relationship with food and eating and will work towards ways to promote a healthy body image among their peers.



Destination: Respecting Your Body

- Students will understand what body image is, how it is developed, and the influences that impact it in both positive and negative ways.
- Students will be able to implement strategies to counteract negative influences on body image. Students will value respect for body shape and size.
- Students will be able to describe common and less common eating disorders and value the goal of having a healthy relationship with food, eating and their bodies.



Itinerary

To take the "Shortcut" in 30 minutes, follow this route in class:

- Ignition (5 minutes)
- Driver's Ed, with minimal discussion (20 minutes)
- Take the Keys (5 minutes)

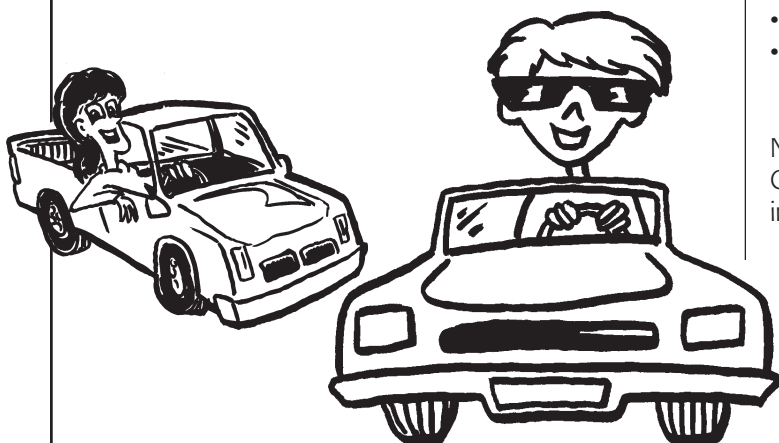
To take the "Standard Trip" in 40-50 minutes, follow this route:

- Ignition (5-10 minutes)
- Driver's Ed (20-25 minutes)
- Test Drive, do 1 option only (15 minutes)
- Take the Keys (5 minutes)

To take the "Extended Trip" in 90 minutes or two class periods, follow this route:

- Learner's Permit, second side only (10-15 minutes)
- Ignition (5-10 minutes)
- Driver's Ed (25-30 minutes)
- Test Drive, doing both options (30 minutes)
- Alternate Route (15 minutes or length of video selected, plus discussion)
- Take the Keys (5 minutes)
- Take the Wheel (10 or more minutes, just begin assignment)

Note: This lesson works very well in two classes. Cover body image in the first class and eating disorders in the second class.





Packing for the Journey:

- Select pre-class assignment option and assign a few days in advance of class.
- Select "route" to take and activities and examples to use.
- If Power Point slides are not used, obtain the following pictures and/or visual aids: An art book with paintings and photographs of historic works of art such as: the Venus de Milo, the Mona Lisa, Rubens' Garden of Love, Seurat's A Sunday Afternoon, Michelangelo's David. A book with celebrity photos including models and actresses of the past century, as well as examples of "ideal" male bodies. Photos or real toys of GI Joe and Barbie. Photo of an expensive car. Photo(s) of obese man and woman.
- An appropriate video could also be used to present information and stimulate discussion.
- If Power Point slides are not used, make overhead transparencies of Power Point slides as needed, such as the "25 cent best friend activity."
- Create Eating Disorders game as described in lesson.
- Obtain video(s) to view as alternate/additional activity.
- Copy student handouts to match your selected activities.
- Computer and Projector for Power Point
- Student Assessment
- Select follow-up activit(ies) for students to complete post instruction.



Your Teaching Road Map . . .

Give Students a Learner's Permit

Provide students with the pre-class handout "What's Your Make and Model?" (page 64). Explain that the purpose of this assignment is to analyze media messages about what "beauty" is, or, what is the "ideal" body for men and women. Students should enjoy this assignment as they are being given a homework assignment to watch TV (or look through their favorite magazine). On the handout they are to tally the number of times each of the following types of "bodies" appear in a visual image and/or are written or talked about:

- "ideal" female bodies
- "normal" and "undesirable" female bodies
- "ideal" male bodies
- "normal" and "undesirable" male bodies

Have the students differentiate in their tallies whether these bodies are in the regular program (or magazine articles), or are in the advertisements. In the space provided on the handout, ask them to describe examples of how each type of body is depicted visually or verbally. For example, does the "ideal" female have a certain body size and shape, "perfect" skin, etc.? What words are used to describe these bodies? How does this differ from any "normal" or "undesirable" bodies? Using the tallies and the duration of shows and/or number of pages in the magazine, the class has the option to determine the average number of times an "ideal" body is shown on television or in a magazine.

The second side of the pre-class handout (page 65) can be assigned to complete before class or at the beginning of class. It has the students reflect on their own body image and what influences them personally.

Put the Key in the Ignition:



What is body image?

Using the power point slides, or pictures you have collected to show instead, open class with a discussion of what body image is.

Slide 1, ask: **What is body image?**

Show slide 2 after several students provide definitions.

Some additional comments:

- body image is how you experience your body mentally, emotionally and physically
- body image is the way you think about your body
- body image is the way you feel about your body
- body image is how you experience living in your body

Slide 3: **What is the ideal body?**

Do you think it differs by gender, ethnicity, culture, age . . . ?
Who defines it?

Do you think the “ideal” body, or society’s definition of beauty has changed over time?

Slide 4: **Let’s look at how the ideal body has changed throughout history.**

Concern with appearance is not new. Every period of history has had a standard of beauty, and every society its concept of ideal physical characteristics. These fertility goddesses show how in prehistoric times wide hips were highly desirable.

Slides 5 and 6: **For many centuries art depicted female beauty as being soft and curvaceous.**

The word “Rubenesque,” which is used for large, beautiful women, comes from the 17th century paintings of Flemish artist Peter Paul Rubens.

Slides 7 and 8: **Just a little over a century ago, a pale complexion was considered beautiful** and women used umbrellas to protect their skin from the sun. They certainly wouldn’t have gone to tanning parlors. Curves were created by corsets and bustles. Plumpness signified wealth and an abundance of food.

Slide 9: **In the Roaring Twenties we saw the era of the flat-chested, slim-hipped flapper.**

Slide 10: **By the 50’s, full-figures were back in style,** like Marilyn Monroe. A model of the 50’s was 5’8’ and weighed 132 pounds, a very healthy weight.

Slide 11: **Just one decade later, Twiggy was the beginning of the ultra thin ideal.**

Slide 12: **Ever since the 60’s, ideal has been underweight.** Look at how Miss America has changed. For the first 40 years Miss America’s were a healthy weight, for the past 40 years they have been underweight.

Put the Key in the Ignition



Slide 13: **In the 70's and 80's, "ideal" became taller and more toned.** The typical model was 5'8" as in the 50's, but now weighed only 117 pounds, which is classified as underweight.

Slide 14: **The early 90's popularized the waif-like look of Kate Moss, tall and very thin,** a nearly unattainable figure for most women, no matter how hard they tried.

Slide 15: **The decade of the 90's also glamorized large breasts. A tall, thin woman doesn't often have large breasts, so this is usually achieved with the help of cosmetic surgery.** According to the American Society of Plastic Surgeons, nearly a quarter of a million women have breast augmentation surgery each year in the United States.

Slide 16: **The average woman in North America is 5'4" tall, weighs more than 150 pounds, and is more than 32% body fat. The average model or actress is much taller, rarely weighs over 120 pounds and has less than 18% body fat.**

Slide 17: **Culture makes a big difference in the definition of beauty. Unlike white women, women of other cultures – African-American, Asian, Latino – have a much broader definition of beauty and are much more likely to have a positive body image.** In a study at Washington University, black women rated themselves as *more* attractive than pictures of supposedly 'beautiful' white fashion models. Another study of overweight black women, found that 40% of these women rated their figures as attractive or very attractive.

Slide 18: **Although African-American women in general are more comfortable with rounder body shapes than white women, many black models and actresses portray the same unrealistic thinness as white models.** For example, actress Halle Berry, pictured on the left, is 5'7" tall and weighs just 103 pounds.

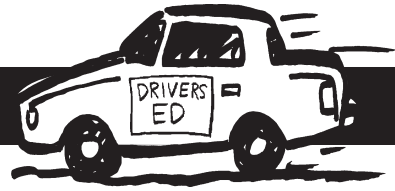
Slide 19: **In case you young men thought society only had an unrealistic definition of the "ideal" female, here are some descriptions of the "ideal" male: He's tall, a couple of inches taller than an average man. He has broad shoulders and a narrow waist, a good 5" smaller than an average man's waist. He's muscular and has only 15% body fat.**

Slide 20: **Strength and vitality has long been the ideal for men, but in looking at Michelangelo's David, his muscular leanness is more realistic than the men on the cover of muscle magazines today.**

Slide 21: **There's no question society's definition of the "ideal" body affects *our* body image. This diagram shows a number of things that influence body image. Before class you counted images from television or magazines depicting the "ideal" female and male. Let's see what these media role models and advertisements showed us.**

Discuss class findings from pre-class activity. If desired, calculate the number of "ideal" images per minute on television, or per page in a magazine. Discuss how "ideal" is portrayed and how it differs from "normal" and "undesirable."

Driver's Ed



Slide 22: **Thanks to the media, we have become accustomed to a narrow definition of beauty and we see a *lot* of it. We see “beautiful” people all the time. The average American sees 3,000 ads every day.** (J. Kilbourne, 2000 *Killing Us Softly 3: Advertising's Image of Women*.) **It has been estimated that young women today see more images of outstandingly beautiful women in one day than their grandmothers saw throughout their entire adolescence.**

As we saw from our research, these ads and media images are *not* pictures of people who look like us. But because we see them so much, it makes us believe these images are real, normal, and attainable; when this ideal is actually unattainable by all but 4-5% of the population.

Slide 23: **Thanks to the wonders of technology, many of the “perfect” images we see are created by airbrushing. The models and actresses don’t look like they appear. This slide shows a regular person with retouching.** According to the magazine industry, nearly all magazine covers and advertising photos have been digitally retouched to remove imperfections, and can even shave pounds and inches off thighs and arms and change body parts like noses and chins. The cost for retouching a cover photo may run as high as \$20,000.

Slide 24: **Look at Jamie Lee Curtis as she really is and with “retouching.” Airbrushing, cosmetic surgery, hairdressers, make-up artists and the wonders of retouched photos give the impression that this is reality.**

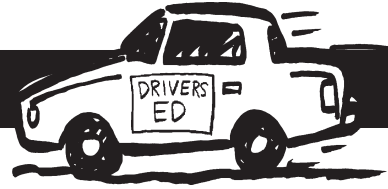
If we add ideal face, skin and hair to ideal shape and size, this “ideal” of beauty is achievable by probably 1% or less of the population. Is it any wonder that more than 75% of American women are dissatisfied with their appearance? Body dissatisfaction is so common in our culture that it is considered a “normative discontent.”

Slide 25: **Even the models and actresses admit to the wonders of retouching.**

Slide 26: **Women are much more critical of their appearance than men are. Men looking in the mirror are more likely to be either pleased or indifferent to what they see. Studies show that men have a much more positive body image than women and in fact often overestimate their attractiveness, overlooking flaws in their appearance much more often than women.**

Do you agree with the research that says women are judged on their appearance more than men? Do you agree that society’s standard of female beauty is higher and more inflexible than the standard for men?

Slide 27: *If not completed before class*, have students fill out the reverse side of the pre-class handout, and/or break into small same-gender groups and discuss the questions.



Slide 28: *If time allows, discuss the questions on this slide as an entire class:* **What messages do you get . . . from your family . . . from your friends . . . from yourself . . . about the "ideal" body? about your body? Do those messages help you deal with the "unrealistic" media messages, or add to them?**

Have you ever thought about *when* our body images start to develop?

(Discuss what students think influences the early development of body image.)

Studies show that female *dissatisfaction* with appearance begins at a very early age. Toddlers can recognize themselves in a mirror at age 2, and young girls begin to dislike their image only a few years later. Surveys of young children show girls as young as 6 years old are going on diets because they think they are fat. By the age of 9, half of all girls have already gone on a diet.

Boys have been shown to go through a period of body dissatisfaction prior to adolescence, but the changes that come with puberty help move boys *closer* to the masculine ideal because boys grow taller, get broader shoulders, and become more muscular overall.

The normal changes of puberty have the opposite effect on girls. Normal physical maturity brings an increase in weight and fat, especially on the hips and thighs, which takes girls *further* from society's ideal of thinness.

Slide 29: **One of the ways you are sent the message of what is the "ideal" body, are the toys you grew up with. How many of you played with action figures like GI Joe or fashion dolls like Barbie? According to Mattel, Inc., the average US girl between 3 and 10 years old owns 8 Barbie dolls.**

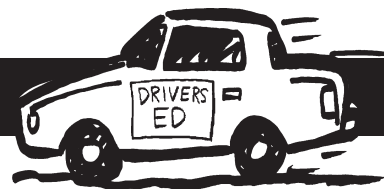
Slide 30: **Barbie is the 11" plastic symbol of Americana. She was created in 1959 and since then has never had "thighs that rub together." She didn't start smiling until 1971, the year Malibu Barbie came out, one of the most popular Barbie's of all time.**

If Barbie were a real person, she would stand 6' tall, weigh 101 pounds, wear a size 4, and her measurements would be 39-19-33, hardly realistic. *(source: www.anred.com)*

Slide 31: **If GI Joe were real his biceps would be 27" in circumference and his chest would measure 55".** *(It is fun to measure something of this size: 27" is often the circumference around both legs above the knees. 55" will be much larger than your most muscular student athlete measured around not just the chest, but around both arms as well. Source: www.physics.ohio-state.edu)*

Slide 32: **Achieving the bodies of GI Joe and Barbie is about as realistic as owning a Lamborghini. What do you think the sticker price is on this car?**

Driver's Ed



Slide 33: **Can you afford \$281,100? Is that a little out of your price range?**

Slide 34: **What does the “perfect” body cost? Is it worth it?**

(These photographs are of Christina Agullera and Vin Deisel.)

Slide 35: **What is YOUR make and model?**

Discuss the questions on this slide as a class:

- **What would it be like if we all drove the same car? (Hard to find in the parking lot!)**
- **So, why do we strive to all look the same?**

Consider how boring the world would be if we were all identical in appearance.

(The Dairy Council posters: “What’s normal supposed to look like, anyway?”, see resource list, are a good visual aid to post on a bulletin board and discuss.)

- **Isn’t uniqueness better?**
- **What are your “signature” features?**

Have students think to themselves (and/or write down on blank piece of paper) 2-3 physical attributes that make them unique, and they are comfortable with. Discuss how genetics determines their size and body shape. Discuss the importance of appreciating or accepting what they inherited (height, body shape, skin, hair and eye color, proportions of various features – long/short arms or legs, shape of nose, feet, etc.) Have students determine to make peace with one physical attribute they consider less desirable.

Slide 36: *As a class, discuss these questions.*

- **How do you define “attractive”?** Write some descriptive words on your paper. How does an attractive person “hold” themselves? What is the expression on their face? etc. Consider when someone who might be classified as beautiful or handsome by society’s standards is “unattractive” and visa versa. What really makes someone attractive? So, is there anything wrong or terribly vain with striving to “look our best”? What are the advantages of being well groomed, making the best of your features, wearing clothes that fit your body and style, carrying yourself with confidence, etc.?
- **How can we appreciate all our bodies do for us?** *Discuss how important it is to appreciate what our bodies do for us – list out loud the functions and abilities they perform for us.* **We really need to appreciate the bodies we live in.**
- **How can we respect external differences?** How often in one day do you, or others you are with, criticize other people’s appearance or bodies? What effect does this have? *Discuss ways we can avoid putting down people who look different than the “ideal” or are different from us.* Could you defend someone who gets teased because of size or appearance?
- **How can we emphasize internal qualities?**

Slide 37: **What are your first impressions?** *(pause for students to reflect)*

Is there anyone who did *not* think something about the size of these people?

There is no question these people are obese. However, they also look confident and happy, healthy and active; but the first impression most people will have is that they are *fat*.



Fat prejudice is common and even acceptable in our culture. Fat children are less popular with both classmates and teachers. Fat people are less likely to be hired for a job and receive lower salaries. They are the butt of jokes and ridicule that would be totally unacceptable for other groups of people.

What is referred to as our “bias for beauty” operates in almost all social situations. Even in court, thin, attractive people are found guilty less often, and when they are found guilty, they receive less severe sentences.

Is this right? What can we do about it?

Is physical appearance really what is most important?

Slide 38: **You are now going to buy a best friend for a quarter. Pretend you have 5 nickels and you can purchase each of these attributes for 5 cents apiece. Write down which 5 you would like to buy.** *(on blank paper)*

Slide 39: **How many of you wrote down these attributes that are highlighted? If this is what you value in a best friend, shouldn't this be what you value in yourself?**

(This activity was adapted from one developed by Joanne Ikeda of UC Berkeley. Used with permission.)

Slide 40: **Does poor body image matter?**

- **Body image dissatisfaction affects our mental health.** It is associated with low self-esteem, anxiety, and the development of depression.
- **Body image dissatisfaction affects our eating behavior.** It is associated with disordered eating, such as extreme dieting behaviors and eating disorders like anorexia and bulimia.
- **Body image dissatisfaction affects our physical activity behaviors.** A poor body image makes participation in activities less enjoyable and may lead many adolescents to opt out of physical activities for sport or recreation.
- **Body image dissatisfaction can affect weight management.** A poor body image can contribute to the development of overweight in several related ways. A high degree of body dissatisfaction is linked to dieting and binge eating, combined with reduced physical activity. Together these can lead to an unhealthy weight gain.

Slide 41: **Poor body image and preoccupation with weight is a risk factor for the development of eating disorders. On the other hand, people who feel good about their bodies and respect and care for themselves, who feed themselves well and enjoy being active, are *unlikely* to develop eating disorders.**

Slide 42: **Let's look now at eating disorders and how a healthy body image and healthy eating can prevent them.**

Test Drive:



"Are You a Healthy or Dysfunctional Eater?"

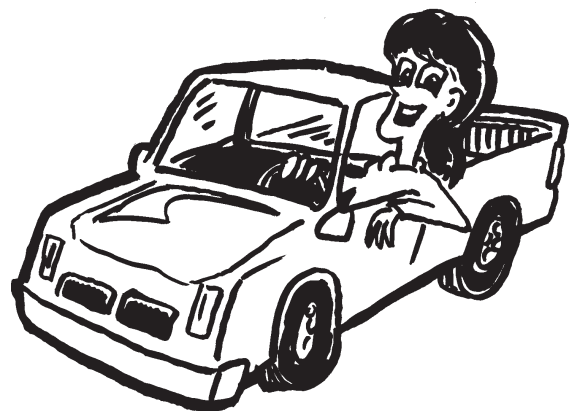
Provide students with either the "Eating Issues and Body Image Continuum" (page 67) or the "Are You a Dysfunctional Eater?" quiz (page 66), or both.

The EATING ISSUES AND BODY IMAGE CONTINUUM reflects the range of eating behaviors and attitudes towards food and body image. The majority of people try to function in the two categories on the far left that reflect high self-esteem and physical health: "Concerned Well" and "Not an Issue." However, people can move from one category to another depending on changes that occur in their self-esteem and attitudes towards food and body image. Also, people can be in one category for food and in another category for body image.

If using the continuum, have students circle the phrase in each horizontal row that is most true for them. If using the quiz, have students answer the 11 questions. Either one can be a screening tool for disordered eating. The continuum also assesses body image concerns. The National Eating Disorders Screening Project found that 30 percent of girls and 16 percent of boys in American high schools suffer from disordered eating.

Discuss the difference between **dysfunctional** (or disordered) **eating** and **eating well**. (This will be covered in more detail in Lesson 7.) Option: Ask two students to read the definitions out loud for the class.

Eating disorders go beyond dysfunctional or disordered eating. Although they may begin with preoccupations with food and weight, they are more complex conditions originating from a combination of behavioral, emotional, psychological, interpersonal, and social factors. People with eating disorders often use the control of food to cope with other aspects of their lives.





Eating Disorders Jeopardy

The objective of this activity is to cover the basics about well-known and less-well-known eating disorders by allowing the students to determine which facts they think describe each eating disorder. The five eating disorders are: Anorexia Nervosa, Bulimia Nervosa, Binge Eating Disorder, Anorexia Athletica, and Orthorexia Nervosa. Therefore, the correct "answers" will be one of five phrases, eg. "What is Anorexia Nervosa?"

This game covers a lot of basic information about eating disorders and is especially appropriate as a review for students who have covered this material previously in class or in previous years. If students need additional review of eating disorders, take two class periods for this lesson and follow one of the "Alternate Route" suggestions.

Break students into small groups for this activity. Three groups is recommended to have 3 competitors at a time, as in the TV version of the game. If you have 30 students, there will be 10 in each group. If you create a "game board" with 4 columns and five rows, each student can play twice.

Facts will be in the following categories: definition, prevalence, symptoms/signs, and risks/consequences. There are enough facts (35 total) to have more than one column of all but the definitions. Select enough facts so that everyone in your class will have at least one turn.

A power point file contains the visual aids you will need. Copy each fact slide onto a piece of paper and tape up onto your chalkboard, covering the fact with a score of 100 – 500. Each fact slide has a small code that tells the category and the eating disorder answer and a suggested point score. Put the categories across the top. The five possible answers (worded as questions), are also printed on slides and should be posted for reference. To increase durability, mount the paper onto construction paper or poster board and laminate. A slide with "Double Jeopardy" is available if you would like to use it and place between the point slide and the fact slide. If used, it doubles the points scored.

Instructions continued on next page.

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Eating Disorders Jeopardy

Group the students and select a method to order the students within each group, either by numbering off if seated in clusters, or horizontally or vertically if grouped by row. Groups will compete for points, with individual students taking turns representing their group. Students can stay in their seats and raise their hands, or come forward, or stand beside their seat, to answer. Make sure you can see all students to determine who raised their hand first, or use a buzzer/bell system if you have one available.

Begin by answering all 5 definition questions first, starting with the 100 point fact and then allowing the student with the correct answer (with their group's input) to select the next item. Once all of the definitions have been discussed, any category/point level can be selected. Not all types of eating disorders are equally represented by the facts, some are used much more than others. Sometimes more than one answer is possible.

As you play the game, take the opportunity to provide information about eating disorders, elaborating on the facts listed. See Teaching Resources for web sites to obtain handouts and additional information to provide.

Have a score board to tally points for each group. Correct answers add points, incorrect answers subtract points. (Option: Incorrect answers equal no points.) When a student gives an incorrect answer, the other students get another chance to give the correct answer. The student providing the correct answer selects the next category and point level. Play as long as time allows.




Alternate Route

Watch and discuss one of the videos about body image and/or eating disorders. If your students have not had previous classes about eating disorders, you might want to show a video, assign a reading from the textbook, or present a class about eating disorders prior to playing the game.

Take the Keys



 **In the United States, it is estimated that between 5 and 10 million girls and women and 1 million boys and men are struggling with eating disorders.** (*Nat'l Eating Disorders Assoc.*)
What did we say were some of the risk factors that lead to eating disorders? (*Refer to Eating Issues and Body Image Continuum.*)

 **A poor body image, and the resulting drive for thinness and dieting behaviors, can lead to eating disorders. How do we describe a healthy body image? Healthy eating?**

 **Eating disorders are serious, potentially life-threatening, and require professional help.**
Provide students with resources to seek help for themselves or others (see take-home handout).

Effective programs for preventing eating disorders are designed to:

- 1) **promote healthy growth and development.**
- 2) **promote healthy eating and activity, not dieting or excessive exercise.**
- 3) **promote positive body image in self and others and counteract unrealistic messages.**

 **Most girls and women, with estimates of up to 80%, and many boys and men, are dissatisfied with their appearance. How can we counteract that?** *Discuss ways to change their environment to continuously reinforce positive body image messages.*



Take the Wheel

Provide take-home assignment (pages 68-69), which can be completed individually or in small groups. The emphasis of the assignment options is on creating awareness and promoting positive body image in self and others. Research indicates that ongoing reinforcement of a positive body image message is more effective than short term instruction. If your classes do these assignments each year, all students will be continually exposed to this message even when they are not in your course.



Driver's Test: What's Your Make and Model?

Answers to the assessment:

1. c
2. b
3. a
4. d
5. a

Driver's Test:



What's Your Make and Model?

1. **Throughout most of history, before the past 100 years, what was generally considered an "ideal" female body?**
 - a. tall and thin, yet large-chested
 - b. petite, flat hips and chest
 - c. pale complexion, soft and curvaceous
 - d. tan skin, toned and muscular
2. **When boys and girls go through puberty, how do the normal physical changes they experience affect body image?**
 - a. it worsens for boys as they gain weight
 - b. it improves for boys as they become more muscular
 - c. it worsens for girls as they get taller
 - d. it improves for girls as they gain weight and get curvy
3. **What percentage of girls and women can naturally achieve the "ideal" body portrayed in the media?**
 - a. less than 5%
 - b. about 10%
 - c. 25-30%
 - d. the media does not promote an "ideal" image
4. **Which of the following is NOT a characteristic of dysfunctional or disordered eating?**
 - a. restricting food intake by dieting
 - b. eating to relieve stress or anxiety
 - c. feeling guilty about eating
 - d. eating as much as I am hungry for
5. **Which of the following disorders results in the growth of a downy layer of hair called lanugo all over the body, including the face?**
 - a. Anorexia Nervosa
 - b. Bulimia Nervosa
 - c. Binge Eating Disorder
 - d. Anorexia Athletica
 - e. Orthorexia Nervosa



Your Spare Tire: Teaching Resources

For further reading:

Berg, Frances M. ***Children and Teens Afraid to Eat: Helping Youth in Today's Weight-Obsessed World***, Third Edition, 2001, Healthy Weight Network To order: www.healthyweight.net

Children and Weight: What Communities Can Do is a tool kit published in 2002 by the Center for Weight and Health at the University of California at Berkeley. It is available at <http://www.cnr.berkeley.edu/cwh/>

Guidelines for Childhood Obesity Prevention Programs: Promoting Healthy Weight in Children Position Paper developed by the Weight Realities Division of the Society for Nutrition Education, October 2002. These guidelines are available at www.healthyweight.net and www.sne.org.

Barlow, SE, Dietz, WH. **Obesity Evaluation and Treatment: Expert Committee Recommendations.** *Pediatrics* 1998, 102:3. Available at <http://www.pediatrics.org/cgi/content/full/102/3/e29>

Shanley, E, Thompson, C. ***Fueling the Teen Machine***. Palo Alto, California: Bull Publishing Co.; 2001.

Web Sites:

<http://www.cnr.berkeley.edu/cwh/resources/>

The Center for Weight and Health at the University of California at Berkeley has an extensive listing of web sites and resources with links to other sites. They have an extensive resource listing about eating disorders and healthy body image at their web site:
<http://www.cnr.berkeley.edu/cwh/resources/eatingdisorderstools>

<http://www.bcm.tcm.edu/cnrc>

The Children's Nutrition Research Center web site has the Children's BMI Calculator and Children's Energy Calculator.

The National Institutes of Health has a BMI calculator for adults at:
www.nhlbisupport.com/bmi/

Growth charts for boys and girls ages 2-20 can be downloaded from the **Centers for Disease Control and Prevention** web site:
<http://www.cdc.gov/growthcharts>

www.caloriesperhour.com is a web site hosted by a lay person but with very informative and accurate information about energy balance

<http://www.nationaleatingdisorders.org>
(good web site for printer-friendly handouts about eating disorders)



Your Spare Tire: Teaching Resources

<http://www.gurze.com>

<http://www.hugs.com>

<http://www.anad.org>

<http://www.anred.com>
(good web site to learn more about less-well-known eating disorders)

<http://www.somethingfishy.org>

<http://www.eatingdisorders.cmhc.com/>

<http://www.girlpower.gov/>

<http://www.about-face.org>

<http://www.justthink.org>

<http://www.hify.com>

<http://www.thebodypositive.org>

<http://www.thebodypositive.com>

<http://www.4women.gov/bodyimage/index.htm>

<http://www.nimh.nih.gov/publicat/eatingdisordersmenu.cfm>

<http://www.mentalhealthchannel.net/eatingdisorders/>

<http://www-hsl.mcmaster.ca>

<http://www.dhs.vic.gov.au/phd/ebhp/06bodyimage.htm>

<http://www.menstuff.org/issues/byissue/eatingdisorders.html>

<http://www.wednewsletter.com/>

"Cover model secrets" at the PBS web site teaches children and youth the tricks of the modeling trade. <http://pbskids.org/entertainment/covermodel>

Dairy Council of California has lessons plans about body image at their web site:
<http://www.dairycouncilofca.org/edu>



Your Spare Tire: Teaching Resources

Videos/Resources:

Body Talk 1

A video for high school students, to be used in facilitating a discussion about body image and eating disorder issues. 28 minutes. Available from The Body Positive, call 510-841-9389, www.thebodypositive.org.

Killing Us Softly 3: Advertising's Image of Women

Slim Hopes: Advertising and the Obsession with Thinness

Both of these videos are the work of Jean Kilbourne and are available from Media Education Foundation (800-897-0089, or www.mediaed.org). These are both very powerful videos. Either one would be excellent for adults (such as for a parent group, teacher in-service, etc.), college students, or older teens. Previewing is recommended before showing to younger teens. A downloadable study guide for Killing Us Softly 3 is available at www.jeankilbourne.com.

Body Image for Boys

This is an excellent 18 minute video geared for high school students that discusses how and why males today also have body image concerns. Video comes with a study guide. © 2002, Cambridge Educational (800-468-4227).

Eating Disorders: The Inner Voice

An informative 25 minute video that describes anorexia and bulimia, including consequences and treatment. Cambridge Educational (800-468-4227).

When Food is the Enemy

A 25 minute video that focuses primarily on bulimia. Available from Meridian Education Corporation, (800-727-5507 or www.meridianeducational.com).

Body Image: Let's Get Real

A 48 minute Canadian film depicting body image and eating disorders in both men and women. © 2000. Available from Films for the Humanities and Sciences at www.films.com or 800-257-5126.

Self-Image and Eating Disorders

A 24 minute Canadian film featuring first person stories of women who have/had eating disorders and are currently or formerly in treatment. © 1996. Available from Films for the Humanities and Sciences at www.films.com or 800-257-5126.

This is Your Life!

This 50 minute video has a 17 minute segment on the media's influence on body image. This video shows a theater production in an actual school and is geared primarily to younger adolescents. It is available from Foodplay Productions at www.foodplay.com or 800-FOODPLAY.

Body Aloud!

A guidebook with information and resources to create youth-led eating disorders prevention programs. Also available from The Body Positive, see above.

"Mirror, Mirror"

A resource guide for helping adolescents develop a positive body image and maintain a healthy weight. Available as a PDF downloadable document for health professionals at <http://www.beefnutrition.org>.

"What's normal supposed to look like, anyway?"

Posters of teen boys and teen girls, available from www.oregondairycouncil.org.

What's Your Make and Model?

Have You Ever Wondered . . .

What is body image and how does it develop?

How do we get our ideas about what is beautiful and what is ugly?

Do messages about body image differ based on gender, age, and culture?



Let's Take a Look

Watch one program on television, or look through one magazine geared towards teens. Look at both the program (or the articles) *and* the advertisements, to see how female and male bodies are portrayed in both visual images and the written or spoken word. What are depicted as "ideal" female and male bodies? How many examples of these ideals are included in the program or articles? How many are in advertisements? What physical traits are depicted in a *neutral* or in a *negative* light? How many of these neutral and negative examples are in the program or articles and how many are in advertisements? On the left side of the page, tally the number of each body type you see. In the spaces provided to the right, describe these body types.

Name of TV show or magazine: _____		
Duration in minutes/number of pages: _____		
Description of:	Visual Images:	Spoken/Written Words:
"Ideal" female bodies # in program or articles:		
# in advertisements:		
"Normal" and "Undesirable" female bodies # in program or articles:		
# in advertisements:		
"Ideal" male bodies # in program or articles:		
# in advertisements:		
"Normal" and "Undesirable" male bodies # in program or articles:		
# in advertisements:		

What's Your Make and Model?

Reflect on the messages about "ideal" versus "normal" female and male bodies in the TV show or magazine you looked at. Were there more "ideal" bodies or "normal" bodies?

List below a few of the messages that were conveyed about what makes an:
"ideal" female body:

"ideal" male body:

How do these messages make you feel about YOUR body?

In addition to the media, we receive messages about "ideal" bodies and our body from ourselves, our families, and our peers.

Think first about all the comments you have made about your body both in your head and out loud since waking this morning. Have these comments been positive, neutral, or negative?

What is considered an "acceptable" body in your family? How do you "measure" up to this standard? Are certain body shapes or sizes openly considered "unacceptable"? How do other family members feel about their bodies? What comments do family members make about your body?

What is considered an "acceptable" body among your peers? How do you "measure" up to this standard? Are certain body shapes or sizes openly considered "unacceptable"? How do your friends feel about their bodies? What comments do friends/peers make about your body?

What's Your Make and Model?

Taking Care of your "Vehicle"

Are You a "Dysfunctional" Eater?

1. Do you usually restrict your food intake?
2. Do you often skip meals?
3. Do you fast or diet, and then binge?
4. Do you frequently eat too much, so your stomach feels overfull?
5. Do you count calories, fat grams, weigh or measure your food?
6. Are you afraid of certain foods?
7. Do you turn to food to relieve stress or anxiety?
8. Do you deny being hungry or claim to feel full after eating very little?
9. Do you avoid eating with others?
10. Do you feel worse (anxious, guilty, overfull) after eating?
11. Do you think about food, eating and weight gain more than seems reasonable?

If you answered yes to three or more of these questions, you may be a dysfunctional eater.

What is "Dysfunctional" Eating?

Dysfunctional or disordered eating is eating in chaotic and irregular ways— dieting, fasting, bingeing, skipping meals – or consistently eating much more or much less than the body wants or needs. Dysfunctional eating is separated from the normal function of satisfying hunger and providing energy for health, growth and well-being, and instead, seeks to reshape the body or relieve stress. It is not regulated by hunger and satiety, but by inappropriate internal and external controls, such as emotions or will power.

What does it mean to "Eat Well"?

It means taking pleasure in eating a variety of foods, celebrating and enjoying food, tasting and savoring food, relaxing in the company of friends and family. It means meeting your body's energy and nutrient needs. It involves listening to your body: eating when hungry and stopping when full and satisfied. It is achieved by eating at regular times, typically three meals and one or two snacks a day and eating in a balanced way – enjoying all five food groups. When you are at peace with food and enjoy all foods in moderation, without restriction or overindulgence, then all foods can fit; there are no "good" foods and "bad" foods. To improve your eating habits, make small changes over time. Live a healthy, nondiet lifestyle to maintain a stable, healthy weight.

Source: *Children and Teens Afraid to Eat*,
2001 by Frances M. Berg Used with permission.



EATING ISSUES & BODY IMAGE CONTINUUM

FOOD IS NOT AN ISSUE	CONCERNED WELL	FOOD PREOCCUPIED/ OBSESSED	DISRUPTIVE EATING PATTERNS	EATING DISORDERED
I am not concerned about what others think regarding what and how much I eat.	I pay attention to what I eat to maintain a healthy body.	I think about food a lot.	I have tried diet pills, laxatives, vomiting or extra time exercising in order to lose or maintain my weight.	I regularly stuff myself and then exercise, vomit, use diet pills or laxatives to get rid of the food calories.
When I am upset or depressed I eat whatever I am hungry for without any guilt or shame.	I am moderate and flexible in goals for eating well.	I feel I don't eat well most of the time.	I have fasted or avoided eating for long periods of time in order to lose or maintain my weight. I feel strong when I can restrict how much I eat.	My friends/family tell me I am too thin.
I feel no guilt or shame no matter how much I eat or what I eat.	I may weigh more than what I like, but I enjoy eating and balance my pleasure with eating with my concern for a healthy body.	It's hard for me to enjoy eating with others.	I feel ashamed when I eat more than others or more than what I feel I should be eating.	When I let myself eat, I have a hard time controlling the amount of food I eat.
Food is an important part of my life, but only occupies a small part of my time.	I wish I could change how much I want to eat and what I am hungry for.	I wish I could change how much I want to eat and what I am hungry for.	Eating more than I wanted to makes me feel out of control.	I am afraid to eat in front of others.
I trust my body to tell me what and how much to eat.	I try to follow the Dietary Guidelines for healthy eating.	I am afraid of getting fat.		I am afraid of eating fat.
BODY OWNERSHIP	BODY ACCEPTANCE	BODY PREOCCUPIED/ OBSESSED	DISTORTED BODY IMAGE	BODY HATE - DISASSOCIATION
Body image is not an issue for me.	I base my body image equally on social norms and my own self-concept.	I spend a significant time viewing my body in the mirror.	I spend a significant amount of time exercising, and dieting to change my body.	I often feel separated and distant from my body - as if it belonged to someone else.
My feelings about my body are not influenced by society's concept of an ideal body shape.	I pay attention to my body and my appearance because it is important to me, but it only occupies a small part of my day.	I accept society's ideal body shape and size as the best body shape and size.	My body shape and size keeps me from dating or finding someone who will treat me the way I want to be treated.	I hate my body and I often isolate myself from others.
My body is beautiful to me.	I nourish my body so it has the strength and energy to achieve my physical goals.	I spend a significant time comparing my body to others.	I wish I could change the way I look in the mirror.	I don't see anything positive or even neutral about my body shape and size.
I know that the significant others in my life will always find me attractive.	I am able to assert myself and maintain a healthy body without losing my self-esteem.	I am preoccupied with my body.	I have considered changing or have changed my body shape and size through surgical means.	I don't believe others when they tell me I look okay.
I trust my body to find the weight it needs to be at so I can move and feel confident of my physical body.		I have days when I feel fat.		I hate the way I look in the mirror.
		I'd be more attractive if I was thinner, more muscular, etc.		

What's Your Make and Model?

Taking Care of your "Vehicle"

The Key of Respect

A healthy body image begins with a healthy respect for the "make and model" of your body. Your size and shape are primarily determined by genetics. To respect your "vehicle" is to take care of your body and keep it running well so it can take you everywhere you want to go. Accept and appreciate your physical attributes. Practice a healthy lifestyle. Eating well and being moderately active every day allows you to be healthy at any size, whether that is thinner or fatter than society's definition of "ideal." Respect also involves reducing the negative effects of the messages we receive from the media, ourselves, and others. It means promoting body acceptance in ourselves, our families, our schools and our communities.



Create a Positive Body Image Campaign

For Young Kids:

Plan a positive body image program for younger children in a classroom, after-school program, or library program. Possible ideas include reading a book about positive body image, such as "I'm Gonna Like Me" by Jamie Lee Curtis; creating and performing a skit; leading a discussion about how models, dolls and super heroes are not "real" bodies; playing games to promote a positive body image; and serving as positive role models.

For Your School:

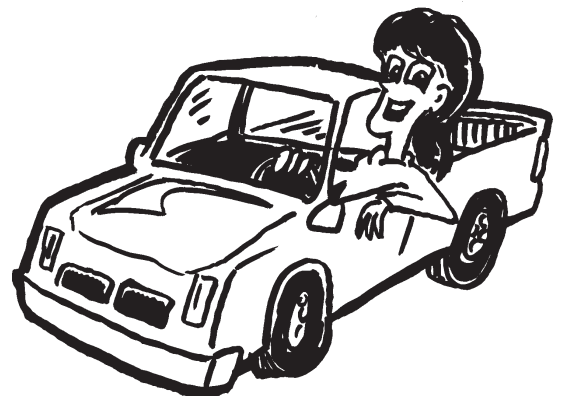
Consider first what takes place at your school that makes it hard for students to like their bodies. This will help you identify the negative influences you need to address in your program. Then create a media message that promotes body acceptance. Select one or more ways to promote your message: announcements, posters, bulletin boards/displays, newspaper articles, etc.

For Yourself:

Create a Top-10 list of things you like about yourself, things that have nothing to do with your weight or appearance. Read it often.

Surround yourself with people who help you feel good about yourself. Practice responding to negative comments about you or others with positive comments that build self-esteem.

Avoid over-exposure to negative messages such as fashion magazines, advertisements, shopping for clothes, looking in the mirror, etc. and decide to "filter" the negative messages and remember that these messages are not reflections of reality. Create a personal slogan that promotes a healthy body image.



Taking Care of your "Vehicle"

Overcome Prejudice

Lead a discussion among family members or peers about weight prejudice. Discuss:

- How does our society view obese people compared to thin people? Is there a "fat" stereotype? What is it?
- How does the media impact the way people feel about the ideal body type?
- Do you think fat people are discriminated against in our society? How?
- How could we defend someone who gets teased or discriminated against because of size or appearance?

Follow-up Options:

Write a short summary.

Write an article about weight discrimination for your school newspaper. Have a class debate.

Be a Media Critic

Rent the movie "Shallow Hal" and view with your friends or family. Discuss: What makes Hal Larsen shallow? What happens after hypnosis and he dates Rosemary, an overweight Peace Corps volunteer? What does he learn when the "spell" is broken?

Eating Disorders — Digging Deeper

Research eating disorders and write a report or article for your school newspaper, or give an oral report describing a disorder, the causes, symptoms, risks, and seeking help and treatment.

Web Sites:

<http://www.nationaleatingdisorders.org>
<http://www.gurze.com>
<http://www.hugs.com>
<http://www.anad.org>
<http://www.anred.com>
<http://www.somethingfishy.org>
<http://www.eatingdisorders.cmhc.com/>
<http://www.girlpower.gov/>
<http://www.about-face.org>
<http://www.justthink.org>
<http://www.hify.com>
<http://www.thebodypositive.org>
<http://www.thebodypositive.com>

When you suspect an eating disorder, what to do . . .

- Let the person know you care and want to help. Be concerned but not judgmental. Find the right time and place to talk.
- Learn all you can about eating disorders and be prepared for the person to deny that there is a problem. Be patient and supportive.
- Don't make comments about the person's appearance or discuss dieting behaviors.
- Don't try to solve the person's problems without expert help. Talk to someone you trust. Seek professional advice. For referrals, call the eating disorders information and referral helpline at the National Eating Disorders Association at (800) 931-2237.

Seek a mental health provider with training and experience in the treatment of eating disorders. Treatment requires a team that includes a support group, family therapy, medical and nutritional care, and a careful psychiatric evaluation and possibly medication. Treatment involves 3 main components – 1) medical: a thorough medical assessment and treatment, 2) nutritional: promotion of intuitive eating, *not* dieting, and 3) psychological: sessions with a therapist to address fear of fat and obsession with body shape, self-esteem and relationship issues.